## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/658,278	09/10/2003	Jacobus Jonkman	3236-21	2449

TITLE OF INVENTION: DIRECTIONAL HEARING AID TESTER

APPLN, TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLIC	CATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700			\$300	\$1000	06/07/2006
, EXAMINER		ART UNIT		CLASS-	SUBCLASS	]	·
BRINEY III, WALTER F		2646	46 381-312000			_	
CFR 1.363).  Change of correspond Address form PTO/SB/1  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Etymonic Des	or more recent) attached. Use D RESIDENCE DATA TO Be an assignee is identified be 137 CFR 3.11. Completion of	Correspondence  ation form to of a Customer  E PRINTED ON To this form is NOT	(1) the na or agents (2) the na registered 2 registered listed, no THE PATEN data will app a substitute (B) RESIDE Dorch	mes of up to OR, alternative me of a single attorney or a sed patent attorname will be proposed for filing an a sex on the part of filing an a sex of the part of	e firm (having as gent) and the nar neys or agents. If or assignment.  and STATE OR ONLARIO	a member a 2 Beres nes of up to f no name is 3  nee is identified below, the company of the comp	300.00 OP
5. Change in Entity Status a. Applicant claims Status The Director of the USPTO NOTE: The Issue Fee and P	f Copies  (from status indicated above MALL ENTITY status. See is requested to apply the Issuer.	od) 37 CFR 1.27. The Fee and Publicate vill not be accepted and Trademark	Payment The Direct Deposit A  b. Application Fee (if are from anyone)	in the amount by credit card ctor is hereby Account Numb cant is no long	er claiming SMA  ply any previous e applicant; a reg	8 is attached.  arge the required fee(s), or cre	CFR 1.27(g)(2).
Typed or printed name	Richard J. Pa	rr			Registration 1	No. <u>22,836</u>	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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## Bereskin & Parr

INTELLECTUAL PROPERTY LAW



Appl. No

10/658,278

Confirmation No.: 2449

**Applicant** 

Jonkman, Jacobus

Filed

September 10, 2003

Title

DIRECTIONAL HEARING AID TESTER

Grp./A.U.

2646

Examiner

Briney III, Walter F.

Docket No.

3236-21/RJP

Customer No.

001059

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

April 6, 2006

## **ISSUE & PUBLICATION FEES**

Sir:

With reference to the Notice of Allowance dated March 7, 2006, we enclose the Issue Fee Transmittal Form in this case, with the issue fee and the publication fee included in our firm cheque for \$1,000.00. Please apply any deficiency in the fees against our Deposit Account No. 02-2095.

Please let us know if anything further is needed.

Respectfully submitted,

Bereskin & Parr

Richard J. Parr, Regn. No. 22,836

(416) 364-7311

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Requirement of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

FRADE Merrective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818). **Application Number** 10/658,278 FEE TRANSMITTAL September 10, 2003 Filing Date For FY 2005 Jonkman, Jacobus First Named Inventor Briney III, Walter F. **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 **Art Unit** 2646 (\$) **TOTAL AMOUNT OF PAYMENT** 1,000.00 Attorney Docket No. 3236-21 METHOD OF PAYMENT (check all that apply) Credit Card Check ✓ Money Order None Other (please identify): Bereskin & Parr 022095 Deposit Account Deposit Account Number: Deposit Account Name:\_ For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 200 **Utility** 300 150 500 250 100 Design 200 100 100 50 130 65 200 100 300 160 80 Plant 150 Reissue 300 150 500 250 600 300 100 200 0 Provisional 0 0 2. EXCESS CLAIM FEES Small Entity <u>Fee (\$)</u> Fee (\$) **Fee Description** 50 Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 100 200 360 180 Multiple dependent claims Multiple Dependent Claims Fee (\$) Fee Paid (\$) **Total Claims** Extra Claims Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20 **Extra Claims** Fee Paid (\$) Fee (\$) Indep. Claims \_ 3 or HP = 0.00 <u>0\_x \_\_</u> HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Extra Sheets** Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) **Total Sheets** (round up to a whole number) x - 100 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other: Issue and Publication Fees 1,000.00

SUBMITTED BY			
Signature	freehood J. For	Registration No. 22,836 (Attorney/Agent)	Telephone (416) 364-7311
Name (Print/Type)	Richard J. Parr		Date April 6, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.